FOR INSTRUCTIONS, SEE BACK OF FORM		FORM	
DISCLOSURE SUMMARY PAGES		DR-2	DISCLOSURE
DISCLOSURE SUMMARY PAGES		(Rev. 01/9)	REPORT
	JA ETHICS AND PAIGN DISCLOSURE	For Office Us	Only A
COMMITTEE NAME (Must be same as on Statement of Organizate Taylor County Democrat Cuttal	on PM 7,15.08 ~	Comm #	9176
IMPORTANT: Indicate type of committee you are reporting for:			
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) C (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central	ounty/Local Candidate	Computer	
(8)Support State of Candidates		J ———	
Drene Joben	712-585-336	, <i>9</i>	7-15-08
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		ESIGNED
Routine Penalties Due For Late File	d Reports Range fror	m \$20 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOI	LOWING SENTENCE:		
· · · · · · · · · · · · · · · · · · ·			•
(report date)	ORT FOR AN/A (1) ELECTI Indica	TION /(2)NON-ELE ate one []	ECTION YEAR.
CHECK IF AMENDMENT TO REPORT DATED	Loc	cal Committees, ente	er Date of Election
Check if this is final (termination) report and attach Notice of Diss (You must continue to file reports until a Notice of Dissolution)		unty & Local Commi ch Election is held	ttees, enter County in
STATEMENT OF CASH ON HAND at the beginning of the reporting period. (This is the	ne total		
of all monies held by the committee. This amount MUST be same as the cash on hand at the end of the last reporting p or must be zero if this is first report filed.)	eriod.	s 5	31,64
ADD TOTAL MONEY TAKEN IN THIS PERIOD	•		· · · · · · · · · · · · · · · · · · ·
Schedule A: Cash Contributions total (Attach Schedule A)		3	00.00
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attach Sci			
(Schedule H applies to Candidates' Committee			
		\$ /	2311/4
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	005-101A2		0311.69
Schedule B: Expenditures total (Attach Schedule B)	•		70 .00
Schedule F: Loan Repayments total (Attach Schedule F)			
CASH ON HAND at the end of this reporting period (if final report, be zero) (Attach DR-3)	alance must		
		· · · · · ·	
UNPAID BILLS (From Schedule D - Attach Schedule D)		•	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)			- · · · · · · · · · · · · · · · · · · ·
OUTSTANDING LOANS (From Schedule F - Attach Schedule F) CANDIDATE COMMITTEES ONLY:			
			YES NO
			ica NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

~ •	HISHINGHO	ne,	300	Dack	10	rom	
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CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Committee	
Taylor County Democrat Com mittee	
Taylor County Democrat Com mittee	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS			
CHECK THIS BOX IF AMENDING FORM				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

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SUB-TOTAL
TOTAL (if last page of this

TOTAL (if last page of this schedule)
a contribution to the

\$ 500.00

Page / of / ...

^{*} Disclosure 'aw requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT B MONETARY (Rev. 09/97) EXPENDITURES STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE CHECK THIS BOX IF PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA AMENDING FORM ETHICS & CAMPAIGN DISCLOSURE BOARD. COMMITTEE NAME (Must be same as on Statement of Organization) Country Democrat Central Committee Taylor CANDIDATE NAME AND ADDRESS TO WHOM PURPOSE AMOUNT DATE ID NUMBER EXPENDITURE (DESCRIBE TRANSACTION) EXPENDED EXPENDED (N applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# Change for Booth Cesh 1/13/08 CK# \$ 70.00 ID# CK# SUB-TOTAL 70.00 TOTAL (if last page of this schedule) 7000

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 56.6(3)(i).)

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SCHEDULE